Judith Hibbard's presentation
"Consumer Willingness to Make
Trade-Offs to Obtain Higher
Performing Health Plans"
presented at the March 2000
"Quality from the Consumer
Perspective" conference
sponsored by AHRQ and HCFA,
suggests that consumers
responded more effectively to
messages that were framed
in a negative way versus in a

Consumer Willingness to Make Trade-Offs to Obtain Higher Performing Health Plans

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Research Questions

- Does a decision frame that emphasizes a potential risk or loss have a greater impact on consumers' comprehension, valuing, and use of comparative information in decisions, over a decision frame that emphasizes a potential gain?
- Is the effect of risk avoidance framing dependent on the inclusion of elaboration messages that provide a rationale for use and directions on how to use the information?

Random Assignment into One of Four Conditions

	Risk Avoidance Message	Gain Maximizing Message
	Compare your health plan choices	Compare your health plan choices
Elaborated	You could be at risk for lower quality care	You can get high quality!
	Use this guide to choose a health plan where people had fewer problems	Use this guide to choose a health plan with high quality care and services
	Protect Yourself!	Get the best!
Unelaborated	You could be at risk for lower quality care from your health plan	Health plan quality from the consumer's point of view



Predictor Variables

Models

Outcomes

Education

Income

Health Plan Rating

Framing

Elaboration

Comprehension

Importance

Trade-Offs



You are more likely to have better quality in some health plans than in others...

Health plan quality varies. A higher quality health plan can mean better care for you and your family.

- Doctors spend enough time with you
- Doctors listen to you
- Doctors explain things well
- You wait in the doctor's office 15 minutes or less past your appointment time
- You get the care you really need
- You can see specialists you want to see
- You get approvals for tests or treatments without delays

You are more likely to have problems in some health plans than in others. Here's why...

Today, when you pick a plan, you are required to use a particular set of doctors. If these doctors are overworked or don't have good people skills, this may cause you the following problems:

- Doctors don't spend enough time with you
- Doctors don't listen to you
- Doctors don't explain things well
- You wait in the doctor's office more than 15 minutes past your appointment time

Most plans also require you to get prior approvals for certain types of care and have rules about when you can see a specialist. This may cause you the following problems:

- You don't get the care you really need
- You aren't able to see specialists you want to see
- You have delays in getting approvals for tests or treatments

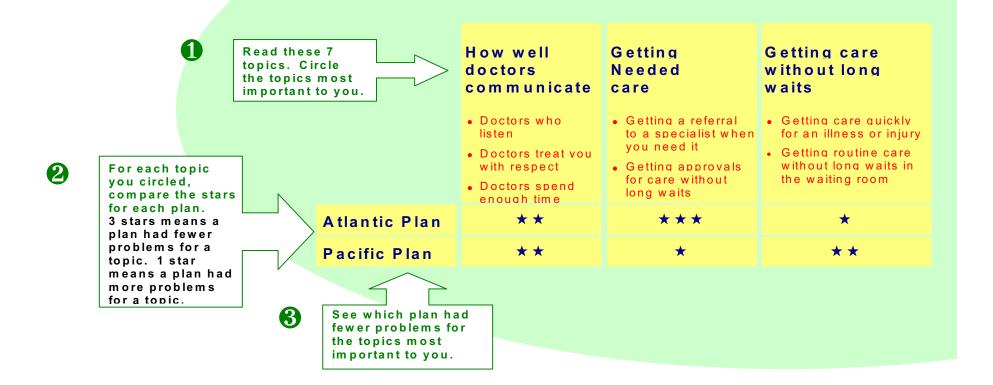
That's why it's important to consider health plan problems along with costs and covered services when you compare plans.

Risk Avoidance, Elaborated



A quick look at how plans compare

It's as easy as 0 - 2 - 3 to choose the plan that's right for you





Risk Avoidance, Elaborated

How people rated their health care	Courtesy, respect, and helpfulness of office staff	-	Health plan paperwork and claims processing
 Based on people's answers to a single question rating their health care on a scale from 0 to 10 	Getting care from courteous, respectful, and helpful office staff	 Health plan customer service staff gives help that is needed Finding information easily in the plan's written materials 	 Reasonable number of forms to fill out Health plan handles daims quickly and correctly
*	*	**	***
**	**	**	*

The stars tell you how each plan compares to the survey average for all plans in the Washington, DC area.

★★★ Fewer problems than the average

★★ About average

★ More problems than the average

The number of stars depends on how big the difference was between a plan's score and the average score for all plans in the Washington, DC area.

207 Study Participants

- Adults ages 18 to 64
- Have private health insurance, now or within last 12 months
- Live in Washington, DC metro area or Raleigh/Durham area
- No vision or hearing problems
- Can read English fluently

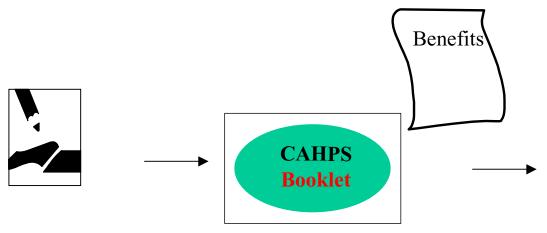


Demographic Characteristics (n = 207)

- Education. 72% at least some college
- Household Income. 21% \$60+ K
- Gender. 65% female
- Race. 61% black or other non-white
- **Age.** 48% 18-34 years, 44% 35-54 years, 8% 55+ years



Procedures

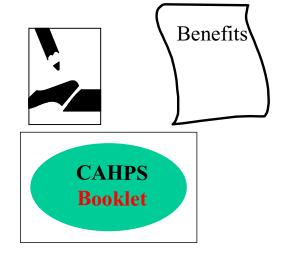


Pre-Intervention **Questionnaire**

- •Comprehension
- •Importance
- Demographics
- •Health
 Status/Utilization

Booklet & Benefits Sheet

•All plans have same benefits & coverage



Post-Intervention Questionnaire w/ Booklet & Benefits Sheet

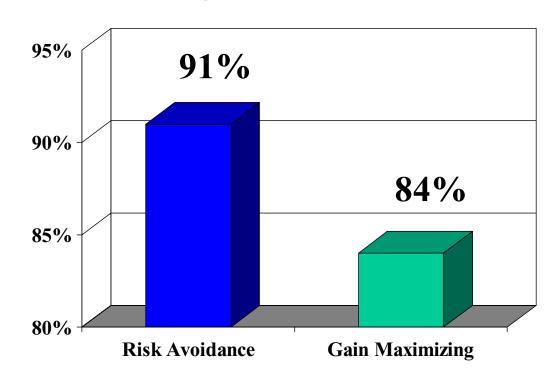
- •Comprehension
- •Importance
- Decision-Making

Comprehension of Comparison Chart

• Those in the **risk avoidance frame** condition **responded correctly more often** to questions about the comparison chart than did those in the **gain maximizing frame** condition.

• FRAMING p < .01

Average Percentage Correct

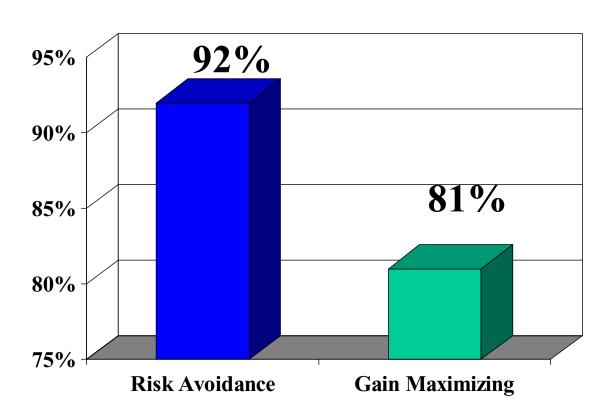


Comprehension of Implications of Choice

• Those in the **risk avoidance frame** condition were **more likely to think that their plan choice makes a difference** in the quality of care and services they receive.

• FRAMING $p \le .01$

Percentage Agreement





Relative Importance of CAHPS

- Respondents had to divide up 100 points among 4 factors based on how important each would be in their plan choice.
- Factors
 - plan member ratings
 - convenience
 - monthly premium
 - whether doctor is in the plan



Relative Importance of CAHPS

- Respondents given a **risk avoidance frame** and **unelaborated messages**, placed a **higher importance** on plan member ratings (relative to other factors).
- FRAMING*EFFICACY p < .05

	Elaborated	Unelaborated	Total
Risk Avoidance Frame	20.2	21.9	21.1
Gain Maximizing Frame	20.6	18.7	19.7
Total	20.4	20.3	



Decision Making Outcomes: Trade-offs

- Participants made decisions about pairs of plans, in each case one of which was clearly a higher quality plan.
 - lower quality plan: 2 stars for all 7 factors
 - higher quality plan: 3 stars for 5 factors, 2 for the others.
- After each choice, participants indicated what they would trade to get the higher quality plan:
 - premium cost (\$0 to Over \$100)
 - driving time convenience (0 min. to Over 60 min.)
 - enroll in a plan where they had to give up regular doctor



Trading Cost for Higher Quality

- **Higher income** participants in the **risk avoidance frame** condition were willing to **trade more in premium cost** than other groups to obtain a plan rated higher in quality.
- FRAMING*INCOME p <.05

 Risk Avoidance Frame 	\$51
Low income	\$41
High income	\$62*
 Gain Maximizing Frame 	\$47
Low income	\$47
High income	\$46



Trading Convenience for Higher Quality

• **Higher income** participants in the **risk avoidance frame** condition were willing to **trade more driving time** to obtain a plan rated higher in quality.

• FRAMING*INCOME p < .05

 Risk Avoidance Frame 	33 min.
Low income	30 min.
High income	36 min.*
 Gain Maximizing Frame 	28 min.
Gain Maximizing France	2 0 IIIII.
Low income	29.5 min.



Trading Own Doctor for Higher Quality

- Higher income participants in the risk avoidance frame condition were more willing to give up their regular doctor to obtain a plan rated higher in quality.
- FRAMING*INCOME p≤.01

 Risk Avoidance Frame 	64%
Low income	60%
High income	85% *
 Gain Maximizing Frame 	66%
Low income	65%
High income	50%

Percentages unadjusted for covariate



Summary

A risk avoidance frame

- •Increases consumers' understanding of the reports
- •Increases the perceived importance of CAHPS data relative to other factors
- •Increases consumers' willingness to trade-off: cost, convenience, and their own doctor for a higher quality plan.



Summary

Elaborated messages:

- •Reduce consumers' understanding of the reports
- •Reduce the perceived importance of CAHPS data relative to other factors
- •Have no effect on willingness to make trade-offs for quality



Implications for Reporting Comparative Performance Data

- •It is better to be brief and to the point; fewer words may make the reports easier to use.
- •Risk avoidance frame more effective than current approaches
- •Important to be evidence based in our approaches to reporting

